Raised Bill No. 7161 AN ACT REVISING THE DEFINITION OF ADVANCED NURSING PRACTICE

Senator Handley, Representative Sayers and distinguished members of the Public Health Committee:

My name is Susan Hope and I am a Psychiatric Advanced Practice Registered Nurse. I serve as the Government Relations Chairperson for the Connecticut Society of Nurse Psychotherapists and I am representing our membership in strong support of Raised Bill #7161.

Psychiatric APRNs provide diagnostic evaluations, psychotherapy and management of psychiatric medication. We routinely work in collaborative relationships with the other healthcare providers associated with our patients to provide optimal healthcare.

Many patients choose APRNs as providers as we offer high quality, holistic, affordable care. We all have at least a Masters level of education, are re-certified by our national certifying organization every five years and carry malpractice insurance at the same level of coverage as psychiatrists.

Under the **current** statute, we can only prescribe for our patients if we can find a psychiatrist willing to enter into a written collaborative agreement with us re: our prescriptive practice. This has been difficult or impossible for many of our members, as physicians are becoming wary of their malpractice liability—they don't treat our patients and are therefore reluctant to enter into such an arrangement. The APRN who is able to find a willing psychiatrist is at risk if the psychiatrist moves, retires or dies of having to precipitously end treatment with a large group of patients in order to be legally compliant.

To offer a personal point of view: I work in private practice and I currently provide diagnostic and medication management services for over 300 patients. I have not had a formal complaint from a patient in 30 years of practice and I provide attentive, quality care to each patient. If my collaborating psychiatrist became uncomfortable with having her liability at risk for the patients I treat and ended the agreement or if she simply decided to move out of state, I could be in a position of having to terminate my practice and tell 300 patients that they had to try to find another provider.

There are more patients needing mental health services, especially medication management, than there are providers to meet that need. Changing the language of the statute to "works collaboratively with other heath care providers" merely reflects the current practice of APRNs. It is a small change that could have a large impact on patient access to mental health services in this state.

Thank you for your time today and for your consideration of this bill.